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ABSTRACT

Health problems impede the academic performance of 12 percent of students. Schools are in a unique position to help their state's Medicaid and children's health insurance programs connect with parents who lack health insurance for their children. This booklet provides suggestions to help school staff identify, inform, and help to enroll families who need health insurance. The booklet presents information on the following outreach activities for schools: (1) making sure parents have materials on children's health insurance; (2) telling parents that free or low-cost health insurance is available for their children (includes tips for talking with parents); (3) distributing information at parent functions or sending it home; (4) identifying children who may lack insurance and passing along the names, focusing on the use of emergency contact cards; and (5) hosting outreach workers or application assistants from a partner organization. The booklet also describes creative, proactive strategies taken in four school districts to insure children in their schools and delineates suggestions for keeping track of the school's outreach activities. (KB)

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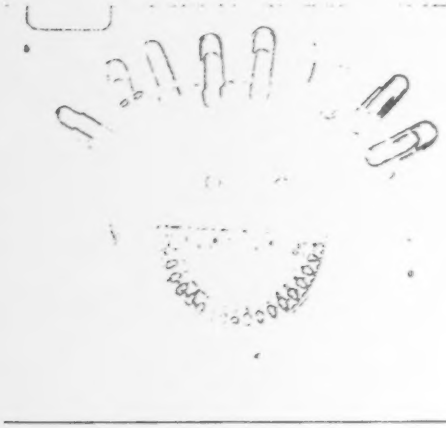

Promoting health insurance for children

A GUIDE FOR SCHOOLS

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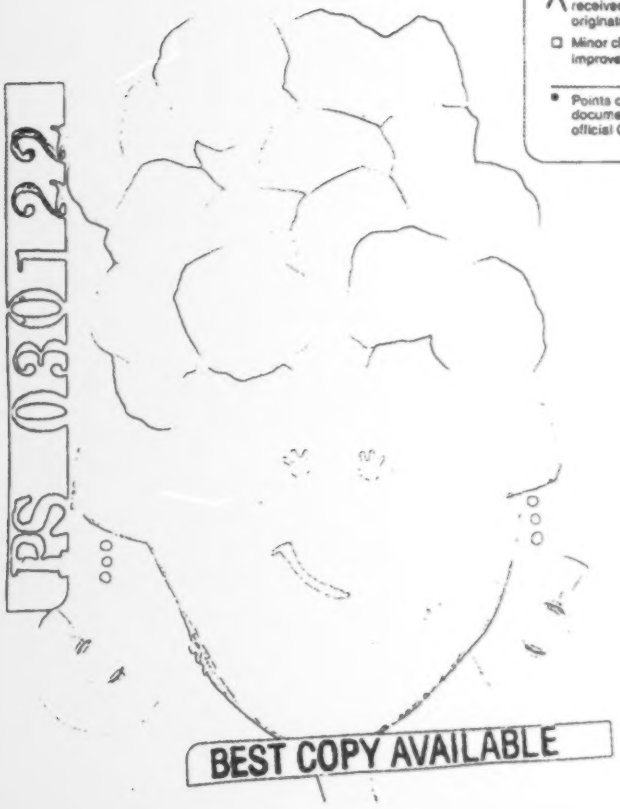

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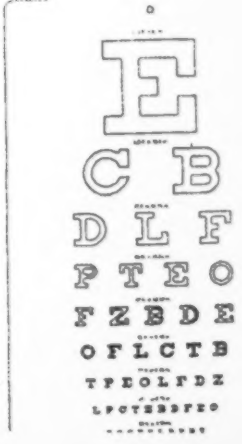

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This document, and companion guides for superintendents, State Medicaid agencies, and healthcare providers, can also be found at
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Washington D.C. ⊙ November 2000

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Ready to Learn

How Your Students Can Get Health Insurance

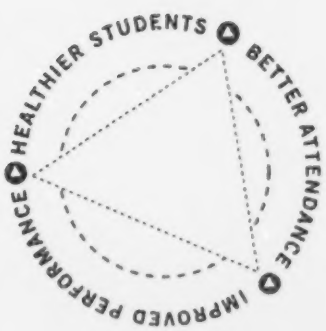
Perhaps you've seen it yourself: Without regular health care, students get sick, miss school, and fall behind. Teachers feel helpless. Students suffer. It's not an uncommon problem. Teachers surveyed by the American Academy of Pediatrics recently reported that health problems impeded the academic performance of 12% of their students—more than one in 10.

Now you have an opportunity to help address this barrier to learning. With a few simple steps, you can help your students secure a key ingredient to quality health care: health insurance. Over the last several years, many State governments have expanded Medicaid and created free or low-cost children's health insurance programs. More kids than ever qualify, including those from working families. But many parents still don't realize what is available and whether their children are eligible. That's where you can help.

You can help your State's Medicaid and children's health insurance programs connect with these parents. A lot of groups are already trying to reach them; your school could be a prime location to do so. School staff—administrators, nurses, social workers, food service staff, and others—could identify, inform, and even help to enroll families who need health insurance.

A little effort can make a big difference. This guide, created by the U.S. Departments of Education, Agriculture, and Health and Human Services, provides several ideas you might try—some very easy, some more involved. It's part of a larger package of materials provided to your school district office.

Your role? You can work with the coordinator who has been designated to coordinate the district-wide effort, if there is one, or you can do more. Just decide which activities are right for your school, carry them out (the directions are all here in this guide), then evaluate how you did. The potential benefits are enormous: healthier students, better attendance, improved performance, stronger test scores, a better future. The next move is yours.



What you can do

What can your school do to make a difference?

- Make sure you have materials on children's health insurance,
- Tell parents that free or low-cost health insurance is available for their children,
- Distribute information at parent functions or send it home,
- Identify children who may lack insurance and pass along the names,
- Host outreach workers or application assistants at your school.

Any or all of these approaches can move your students closer to getting health insurance and securing regular health care. Pick the ones that best fit your school. A key to success is to have a person designated by the principal who organizes and monitors the effort and who works with the district office, others in the school, and any partners in the community. This person could be the school nurse, social worker, guidance counselor, or an administrator. The following material explains each of these approaches in more detail.

Make sure you have materials on health insurance

An easy first step for outreach is getting information about your State's Medicaid and Children's Health Insurance Programs. Ask your school district office; they may have already ordered a variety of materials for you. These materials should be distributed to parents. They also may be especially helpful for school personnel, such as school nurses, social workers, coaches, guidance counselors, or teachers, who may be aware that a student is having difficulty getting health care.

Tell parents that free or low-cost health insurance is available

Once school personnel know more about what's available, they can talk to parents of children who are likely to be eligible. Your nurses, counselors, teachers, and other personnel talk to parents all the time. For tips on how they can talk to parents specifically about children's health insurance, see **Box 2**.

Distribute information at school functions or send it home

You already do this when you send out report cards, lunch menus, emergency contact cards, school newsletters, and parent/teacher conference reminders, or when you see parents at school functions. Getting the word out about children's health insurance is not that much different. It is simply a matter of making sure that information is widely disseminated and coordinating follow up with the appropriate person (probably an application assistant in your local Medicaid agency).

Distributing information. A lot of schools use flyers or other written materials. You can pass these out ***if they seem appropriate for the families in your community***. If you need materials in a particular language, request them through your district office or directly from the appropriate State agency. There are also many other ways to inform parents. Figure out the most effective ways to get to the parents you are trying to reach: these might include a letter from the principal, an article in a local weekly newspaper, or a presentation at a parents meeting. It all depends on the parents you want to reach and the information sources they are likely to see and trust. For more ideas, see **Box 3**.

Remember, though, that no matter how information is distributed, the process will take manpower. You will want to think through the steps, and recruit individuals and groups to help you with the various tasks involved.

Following up. Families who receive your outreach materials may have questions or may be looking for additional information. Who will follow up to answer those questions and help families fill out the application form? Designating a point person or finding an outreach partner in your community is usually the best bet. (See "**Host an outreach worker**," below). Other organizations in your community may also have resources to assist you in this important step. Without follow up many families will never enroll.

Identify children who may lack insurance and share the information that will get them insurance

Teachers, nurses, social workers, counselors, coaches, and community volunteers who work in your school have relationships with students. They know which students are likely to need health insurance. Your school can also identify potentially eligible children through activities you already have underway, like emergency contact cards. ***With parental permission***, you can pass this information to others who can enroll these children in Medicaid or the State Children's Health Insurance Program. In that way, these students get another step closer to being insured. Here are two ways to make it happen:

Emergency contact cards: Many schools use contact cards to obtain important information in case a student is injured or becomes ill. These cards usually include contact information for parents or guardians, the student's doctor, and back-up emergency contacts; a list of the student's allergies or other important health information; and insurance information. If your school uses these cards, some minor modifications can help to identify students who lack health insurance or parents who want to learn about what options are available. Check with your district office about what modifications are possible. With the parent's consent, you can make the referral to the State, a community-based organization, or some other entity for follow-up assistance. An outreach worker from the organization can then contact the family and offer to help them fill out the application. Two keys to success: Remember to obtain parental permission to pass along the names of potential enrollees and figure out who can do the follow up. **Box 4** contains a sample emergency contact card.

Using staff to identify uninsured students. One of the most cost-effective ways to identify children who may be eligible for your State's children's health insurance is simple communication. By keeping key school staff—such as school nurses, social workers, or guidance counselors—informed, they can often identify children through your everyday efforts. After all, your staff has built relationships with the students in your schools. They know which kids are least likely to have insurance and which families may be open to receiving insurance information. Once again, the school's outreach point person or the district coordinator will need to make sure that follow up takes place once students are identified.

Schools may want to consider asking the local health department or a local outreach organization (such as a Covering Kids grantee) to conduct a brief orientation for relevant school staff. This orientation session should cover the basics of the application process, and who is eligible.

Host outreach workers or application assistants

Schools are a great site for reaching parents, though you may lack the manpower. Meanwhile, community-based organizations have the opposite problem: They are conducting health insurance outreach but may not have access to the parents. By becoming partners and sharing resources, schools and these organizations can ensure that many more students get insured.

One proven strategy is to place outreach staff from partnering community organizations inside your school at regular times or during key events. Contact your district coordinator (listed in the letter that came with this guide) to help you establish partnerships with local organizations. **Box 5** gives you some tips on hosting an outreach worker from another organization.

Two important partners are your local health department and your State Medicaid agency. In some States, a separate agency administers the Children's Health Insurance Program. In these States, this agency is also a key partner. You may already have a relationship with someone in your local health department. That person may be able to connect you to local outreach resources in your community. Your State Medicaid or children's health insurance agency can provide you with many of the resources and skills you need to get the job done: funding, training, technical assistance, printed materials, feedback, lists of potential partners, even a staff person in your school. This agency can also put in place an inter-agency agreement with your district and reimburse you for some of your outreach activities. Contact the district coordinator to determine whether your district has already established a partnership with your State Medicaid agency or any other organization.

Doing more

Some schools may be able to do all of the things listed above—and more. There is no exact answer for what might work in your school. Your school may be able to partner with a health agency in your community to facilitate enrollment. Another school may have the resources to hire its own outreach worker or more staff. You may even combine the above options to form your own hybrid outreach program. Below are four examples of school districts that have taken creative, pro-active steps to insure kids in their schools. Maybe one of these strategies can work for you.

Hire specific outreach staff. Hiring an outreach worker may be easier than you think. In school districts in San Diego County, California, certified application assistants are working in schools to help enroll students in their State's Children's Health Insurance Program. These application assistants work full time at participating schools for a defined time and are salaried under a State grant. In addition, the school receives $50 from the State for each completed application. By working directly with school nurses, the outreach is also coordinated to the needs of each school.

Designate existing staff to outreach. Delaware's Brandywine School District has committed to insuring their children. In 11 elementary schools in the district, school nurses are leading the outreach activities. These staff are responsible for mailing out letters and applications to parents whose children's emergency contact cards have incomplete health insurance information. Later, the nurses contact these families to determine if parents want to apply and if they need help with the application procedure.

Create partnerships. Integrating a partnership, or even two or three partners, into your school activities can lead to long-term success. The Chicago Public Schools' (CPS) work with numerous partners has allowed the district to expand its outreach activities and establish a hugely successful program.

In the CPS system, parents must pick up their child's report card in person. This policy has been a great opportunity to reach potentially eligible families. With the help of the Illinois Medicaid agency, more than 2,000 workers have been trained to staff tables and assist families with the application form on Report Card Pick-Up Day.

CPS has also partnered with the Illinois Department of Public Aid to establish designated experts in their schools to help parents fill out children's health insurance and Medicaid forms. In addition, they have established six regional KidCare centers, staffed by 12 outreach workers (who are CPS employees) located within schools, so parents can receive help completing the application during the year.

Seek State grants. Limited resources are often the biggest barrier to implementing outreach. State funds are accessible in several ways, however. Mini-grants are awarded to successful outreach proposals and in a few States, application fees are paid to qualified entities for each completed and approved application. The Patagonia School District in Arizona received a grant to reach more than 200 families in Patagonia and the surrounding rural areas. School nurses and outreach workers are paid to make home visits to families to determine eligibility and assist in enrollment. Contact your district coordinator to discuss how you can work together to apply for funding.

Keeping track

Once you have decided what actions your school is going to take, you need to determine how you will keep track of your outreach activities. Your school district coordinator may have already established indicators that your schools will be monitoring, but here are a few tips for your school to think about:

Materials distribution

- Keep track of materials passed out during the school year,
- Keep track of how many events each month or each semester in which materials are made available,
- Record how many of each informational product is sent out at various events or times,
- Stamp each enrollment application with your school seal before you send it out. The State Medicaid office can then count how many came from your efforts.

Emergency cards

- Count how many emergency contact cards you received for students who are uninsured, and calculate this as a proportion of all the cards you received,
- Count how many emergency contact cards you have at the end of the school year for students who are still uninsured. Compare these two proportions to see the change.

Staff interaction

- Ask your school's staff who work with families to keep track of how many encounters with families they have in which they discuss children's health insurance.

Share the results from the above suggestions with your district coordinator.

Box 1 What kind of free or low-cost health insurance is available?

1

Despite unprecedented economic growth and record employment in the United States, approximately 10 million children under age 19 lack health insurance coverage. Three out of five of these children, roughly 6 million, live in families with household incomes below 200% of the Federal Poverty Level ($34,100 for a family of four in 2000).[1]

What's really amazing, though, is this: two government programs—Medicaid and the State Children's Health Insurance Program—currently offer coverage for most of those children. Funded by both the State and Federal governments, these two programs could cover millions more children—not just poor children but children in working families as well. In other words, the coverage is there. And it's affordable. What's missing are the kids.

Every State offers health insurance through both Medicaid for low-income families and the State Children's Health Insurance Program for working families. The program requirements and names vary from State to State.

Before 1996, low-income Americans obtained Medicaid through their eligibility for cash assistance programs, either through Aid to Families with Dependent Children (AFDC) in the case of single parents and children, or through the Supplemental Security Income program for disabled children and adults. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, which reformed welfare, replaced AFDC with a new State-run Temporary Assistance for Needy Families (TANF) program and de-linked eligibility for cash assistance and eligibility for Medicaid. At President Clinton's insistence, the bill ensured that all families who would formerly have qualified for Medicaid under a State's AFDC program would remain eligible for Medicaid.

In 1997, Congress created the Children's Health Insurance Program—the largest expansion of health insurance in 30 years—to reach children whose parents earn too much to qualify for Medicaid, yet not enough to afford private health insurance. Now that all State programs are up and running, State governments are putting their efforts into "outreach"—that is, promoting the programs and helping parents enroll their kids.

[1] U.S. Census Bureau, Current Population Survey, 2000

Box 2 Tips on talking with parents about children's health insurance

2

Why is children's health insurance important?

Healthy children are better learners. Children with health insurance are less likely to miss school because of illness, do better academically, and improve their economic future. Unfortunately, many working families cannot get the best health care for their children because they cannot afford health insurance. About one in seven children nationally do not have health insurance.

What can I do?

You are in a unique position. Every day, you are in contact with children, some of whom are probably uninsured. Occasionally, you are in contact with parents as well. Tell them that you care about their child, and that you think health insurance is important for their child to thrive.

What can I say to parents?

Research has shown that parents value a few specific benefits about health insurance. Try these strategies with the parents you meet.

- Does (child's name) have health insurance? If not, let me tell you about a new program for working families who can't get private health insurance.
- When you have a medical emergency, you need help and you need it fast. It is easier to get your children the kind of care they deserve when they have insurance. You can take your child to the hospital, see a doctor in his or her office, and you can afford the shots and check-ups that keep your children from getting sick.
- Best of all, when your kids have quality health insurance, you don't have to worry about what you will do if they get sick or hurt.
- Nothing is harder on a parent than having to cope with a sick child. Parents lose sleep, time at work, and are stressed out when their kids are sick. Insured children are healthier children. They also miss less school, do better in school, and have a better future.
- Health insurance saves you money. This insurance covers doctor's visits, regular check-ups, hospitalizations, and prescription drugs. Sometimes, the insurance also covers other things like eyeglasses, addiction treatment, or dental care. You know how expensive those services can be if you have to pay for them.

What else can I do?

After you have given your best pitch for children's health insurance, see if the parent seems interested in pursuing it. If he or she wants to get a child signed up, help them complete the application form right away. If not, talk to them about how they will get the application filled out and sent in.

- What documents or information will parents need to get and how will they do that?
- Is there anything else that will get in the way of applying (paying the application fee, making copies of documents)? Talk together about how you can help the parent overcome these obstacles.
- Set up a plan and agree on a date to complete the form and mail it in with the needed documents. Check in with them to make sure they followed the plan.

Box 2 **Tips on talking with parents about children's health insurance (cont.)**

Common questions about the State Children's Health Insurance Programs

Parents may have lots of questions. Some of the most common topics or questions include:

2

Program sponsorship
The State and the Federal government jointly fund your State's Medicaid and State children's health insurance programs. Sometimes, the State's children's health insurance program is part of Medicaid; sometimes it is a separate agency. Your State may have different names for its programs.

Sources of further information
Parents can get more information and help by calling local or State agencies, which have toll-free telephone numbers, or by calling 1-877-KIDS-NOW (1-877-543-7669). If you refer many parents for information, try calling the numbers yourself to see how the system works and how you can make it easier for parents to navigate. Information is also available on each State program on the Insure Kids Now! Web site: *www.insurekidsnow.gov.*

Cost
The cost of health insurance in these programs is free or low-cost. Parents can get more information on this by calling the local or State agency toll-free telephone numbers or the national toll-free number (1-877-KIDS-NOW).

Legal residency status
If the child is a qualified alien, he or she may be eligible for the program. According to the Immigration and Naturalization Service, parents' application to either of these programs will **not** affect the status of future residency or citizenship applications by the parent or the child. Schools with large numbers of immigrant families may already have relationships with community-based organizations that can provide more information on this issue and respond to parents' concerns.

Privacy and confidentiality concerns
Many parents will want to know why it is necessary to provide all the information on the insurance application form and who will be reading the form. The information provided is needed to determine if the child is eligible. It is confidential information and is not sent to any other State or Federal agency.

Box 3 Ideas for getting the word out

3

Put a blurb in your usual forms, letters, or newsletters

- Welcome letters to new families or at beginning of the school year
- Parent-teacher conference announcements
- Permission slips
- School calendar
- Lunch menus
- School newsletters

Add a flyer in your regular mailings to parents

- School lunch application
- Report cards
- Vocational programs
- Winter carnival
- School pictures
- School events

Put posters on the walls and put flyers and applications out in offices and at special events

- School nurse's office or health clinic
- Counseling office
- Main office
- Immunization days/hearing and vision screening days
- Health and science fairs
- Pep rallies
- Back-to-school nights
- Parent-teacher conferences
- Registration days
- Report card pick-up days
- After-school activities
- Sports registration
- School bulletin boards

Box 3 **Ideas for getting the word out (cont.)**

3

Have school staff members talk with parents whenever possible

- School nurse
- Title I coordinator
- Coaches
- Tutors
- Social worker
- Parent educator
- Guidance counselor

Have students help get the word out

- Peer counseling
- Student counsel
- School newspaper
- Community service requirement
- School TV or radio station
- School Web site (provide links to State or national Web sites)

Mention health insurance at community presentations

- PTA meetings
- School board meetings
- Weekly community newspaper
- Other community relations activities

Reach kids and parents who are most likely to qualify at times when you can talk with them

- Alternative education
- Adult education
- Classes for pregnant teens
- Community education
- Immigrant education
- New student orientation/Freshmen orientation
- Head Start Program

Box 4 Using emergency contact cards

4

Many schools require that all students fill out an emergency contact card at the beginning of the school year. This card—which contains information on how to contact parents in the case of an emergency, and information on any medications that a child is taking—can be an easy way to determine which students lack health insurance.

By allowing parents and guardians to sign a release and request for more information, you can send them more information about children's health insurance, and/or pass their name on to an outreach worker or partner organization to make a follow up call.

The following is an example of a health emergency card from the San Diego (CA) school district. The back of the card is in Spanish.

SAN DIEGO UNIFIED SCHOOL DISTRICT
HEALTH INFORMATION EXCHANGE CONSENT

Child's Name: _____ Birthdate: _____
Last First Middle Month/Day/Year

School: _____ Grade: _____ SS#: _____

Health Problem/Allergies: _____

Medication: _____ Dosage: _____

Physician's Name/Clinic: _____ Telephone #: _____ ❑ No Physician

Health insurance plan: _____ ❑ No Health Plan
(If Medi-Cal, Healthy Families, or other health plan, please write name of health plan)

❑ I would like to learn more about health insurance for my child; you may release my name, address and telephone number to an authorized insurance enrollment worker.

To help school/medical providers in the coordination of my child's health and academic success, I give permission for San Diego Schools, my child's doctor, and health insurance plan to exchange health information as needed. (Example: chronic medical conditions, recent hospitalizations, medications and medical procedures at school, immunization data, vision/hearing screening results.)

_____
Parent/guardian signature or Authorized representative of minor student | Parent/guardian name (print) | Date

Please check if you would like the school nurse to provide the following over-the-counter medications: Advil, Motrin, Tylenol, and Calamine lotion to your child as appropriate: ❑ Yes ❑ No

_____
Parent/guardian signature or Authorized representative of minor student | Parent/guardian name (print) | Date

Phone #: ( ) _____ ( ) _____
Area code Home Area code Work

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Box 5 Hosting an outreach worker from a partner organization

5

Hosting an outreach worker is the best way to get kids signed up for free or low-cost children's health insurance. The outreach worker can work on-site at your schools to follow up with families that need insurance, help parents fill out forms, and then help them choose health plans and negotiate the health care system.

For the outreach worker to be effective, he/she needs an office and some supplies. Here are some tips for helping the outreach worker get settled in:

- Introduce the outreach worker to school staff who often interact with families, such as the school nurse and aides, the counselor, and the coaches. Let them know that the outreach worker will be on site to help families apply for and use health insurance for their child
- Have a designated space for the outreach worker where he/she can meet in private with families
- Arrange for access to the copy machine (including any security codes or logins), basic office supplies, and a telephone for the outreach worker
- Arrange for school to be open after hours or on weekends when parents are more likely to have time to come in and discuss health insurance with the outreach worker
- Make the outreach worker feel welcome and part of the school team. Check in to see if he/she has other needs to be more effective.

*U.S. Government Printing Office: 2001 — 571-563